

ENTRY BLANK

PLEASE TYPE OR PRINT

Entered previous May Show

yes no

Ms.

Mr. Artist

John MacNeille

(Last Name Last)

Permanent
Address

1534 Rydalmount Cleve. Hts.
Street City

44118

Tel. (216) 311-1634

Zip

Area Code

Temporary or
Studio Address

Street

City

Tel. ()

Zip

Area Code

If you do not presently live in one of the counties of the Western Reserve, which county were you born in? _____

Collaborator _____

(If Any)

If May Show entries are not accepted or not sold:

- Artist will pick up at Museum.
 Museum should dispose of.
 Museum should ship to artist C.O.D. at this address:

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until August 21, 1977.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature _____

John MacNeille

ENTRY BLANKS

1

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Materials

photograph (B.W.)

Title

University Circle 1977

Price or NFS

Insurance Value
if NFS Only

Size

NFS

\$25.00

10" X 14"

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
UnframedPrice of
Frame

ACCEPTED

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

REJECTED

114 (3)

2

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Materials

Title

Price or NFS

Insurance Value
If NFS Only

Size

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale

Total No. in Edition

Price
UnframedPrice of
Frame

ACCEPTED

DO NOT WRITE IN
THIS SECTION

ACCEPTED

RECEIVED

REJECTED

REJECTED

DATE

5/5 6/4

DO NOT DETACH

1977 MAY SHOW

The Cleveland Museum of Art
Cleveland, Ohio 44106

Dates for Pick-up of Objects

Rejected Objects: June 20 through 25

Accepted Objects: August 26-27, 29 through September 2

Name

John Marquille

Address

1534 Rydalmount

City & State

Cleve Hts.

Ohio 44118

Zip

DO NOT DETACH



NOTIFICATION CARD #2

1

- | | | |
|---------------------------------------|--------------------------------------|---|
| <input type="checkbox"/> 1. Paintings | <input type="checkbox"/> 2. Graphics | <input type="checkbox"/> 3. Photography |
| <input type="checkbox"/> 4. Sculpture | <input type="checkbox"/> 5. Electric | <input type="checkbox"/> 6. Crafts |

Title

UNIVERSITY CIRCLE 1977

DO NOT WRITE IN THIS SECTION

114 (3)

ACCEPTED

REJECTED

2

- | | | |
|---------------------------------------|--------------------------------------|---|
| <input type="checkbox"/> 1. Paintings | <input type="checkbox"/> 2. Graphics | <input type="checkbox"/> 3. Photography |
| <input type="checkbox"/> 4. Sculpture | <input type="checkbox"/> 5. Electric | <input type="checkbox"/> 6. Crafts |

Title

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

This is your only receipt to claim your object(s).

It is understood that the Museum will have the right to dispose for its own account any object not called for by the dates listed.